

Dear Editor-in-chief

World journal of gastrointestinal endoscopy

Reg: Revision of manuscript in accordance to reviewer comments

At the outset, let me take this opportunity to express my gratitude for considering our manuscript titled 'Role of endoscopic ultrasound guided fine needle aspiration/biopsy (EUS-FNA/B) in the evaluation of intra-abdominal lymphadenopathy due to tuberculosis (TB)' (Manuscript no. 68537) for publication in your esteemed journal. We would also like to thank the reviewer and the science editor for their valuable comments. We have addressed all the comments and made the appropriate changes in the manuscript. Please find below the specific changes made in response to each of the reviewer comments:

1. (Page 2, Line 9) Would you please add the full spell of "AFB"? – **Has been added to the manuscript**
2. What is the difference between patients who were performed FNB and patients who were performed FNA? – **There were only a few patients (n=10) who underwent EUS-FNB in this study. Hence no meaningful differences could be seen in this study.**
3. Would you please add the figure of hetero-echoic nodes? – **Has been added into the manuscript as Figure 2**
4. (Page 12, Line 13) Citation number 7 is a space away from the previous sentence. – **Has been changed appropriately**
5. This manuscript was written about EUS-FNAB in the evaluation of lymphadenopathy due to TB. Is the result of EUS-FNAB for abdominal lymphadenopathy (Table 1) necessary? If it is necessary, final diagnoses should be included. – **Final diagnoses has been added to table 1**
6. Patients whose mediastinal lymph nodes were punctured are included in Table 2. In the title, "abdominal lymphadenopathy" is written. – **These were patients with both abdominal and mediastinal nodes. EUS-FNA results included are only for abdominal nodes. This has been amended accordingly in the manuscript.**
7. Would you please add the data of FNAB needles or gauge of FNAB needles, the rate of FNB, sensitivity, specificity, accuracy in Table 2? – **Has been added into Table 2 as suggested**
8. How should EUS-FNAB be performed to acquire sufficient specimens for histologically diagnosing TB? (For example, all patients who were not histologically diagnosed as TB were performed EUS-FNA.) If possible, would you please add the description about that in discussion? – **A section has been added in discussion that provides useful information to optimize the procedure of EUS-FNA for the diagnosis of tuberculosis.**

Please find below changes made as suggested by the science editor:

1. Summary of the Peer-Review Report: This manuscript was written about EUS-FNAB in the evaluation of lymphadenopathy due to TB. Is the result of EUS-FNAB for abdominal lymphadenopathy necessary? If it is necessary, final diagnoses should be included. Please add the full spell of "AFB". Please add the figure of hetero-echoic nodes. The questions raised by the

reviewers should be answered; - **All suggestions made by the reviewer have been addressed with changes made accordingly in the manuscript.**

2. Academic norms and rules: The authors provided the Biostatistics Review Certificate, and the Institutional Review Board Approval Form. The authors should provide the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement, and the signed informed consent. No academic misconduct was found in the Bing search. – **Has been provided**
3. Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor; - **Has been provided in the requisite format**
4. PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout; - **Has been provided and revised accordingly**
5. The “Article Highlights” section is missing. Please add the “Article Highlights” section at the end of the main text. – **Has been added**

We hope that all the reviewer comments and science editor recommendations have been addressed appropriately. Please let us know if there are any more changes that are required in the manuscript. We would like to thank you once again for your valuable feedback on the manuscript.

Thank you

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